

## Physical activity of rural residing children with disabilities: perceptions of parents/carers

**Jessica Langham<sup>1</sup>, Luke Wakely<sup>2</sup>, Catherine Johnston<sup>1</sup>, Kym Rae<sup>3</sup>**

<sup>1</sup>School of Health Sciences, University of Newcastle; <sup>2</sup>Department of Rural Health, University of Newcastle; <sup>3</sup>Department of Rural Health and Gomerai gaaynggal Centre, University of Newcastle, NSW

### Introduction

Physical activity (PA) has been shown to be an essential component of children's health and development. Evidence shows that children with disabilities are less active than their similarly aged peers and face multiple barriers to PA. Research also shows that children who reside in rural areas face barriers to participation in PA. As yet there is no research investigating the level of participation in PA or the barriers faced by rurally residing children with a disability. Therefore the aim of this project was to describe parent's perceptions of PA undertaken by rurally residing children with disabilities and possible barriers to further participation.

### Methods

This study was undertaken in 2014 through the University of Newcastle Department of Rural Health. The research was conducted by an honours student and members of the University staff. Participants were parents and carers of school aged children (aged 5 to 18 years) with a disability, who resided in a rural or remote area and accessed a local disability organisation or private allied health service in Tamworth. A paper based semi structured survey was developed asking about participant demographics, child's characteristics, child's participation in PA and barriers to PA. The survey was mailed out to participants through the local disability organisation and private allied health service. Quantitative data were analysed using frequencies and proportions whilst the qualitative data were thematically analysed using generic qualitative descriptive methodology of qualitative content analysis.

### Results

Thirty four surveys were returned with an overall response rate of 10%. Of the participants who were estimated to meet the inclusion criteria (n=95), 34 surveys were returned which gives an actual response rate of 36%. Surveys were returned from participants who resided in inner regional (n= 13, 38%), outer regional (n=20, 59%) and remote (n=1, 3%) areas of New South Wales (NSW) Australia. The majority of the respondents were female (n= 30, 88%) with an average age of 44 years (SD  $\pm$  7.72, range, 28-67 years). The majority of the children described in the surveys were male (n=19, 59%) with a mean age of 11 years (SD  $\pm$  3.90, range, 5-18 years). The children included had a range of disabilities including behavioural disorders (n= 15), neurological conditions (n=11), genetic conditions (n=7), digestive disorder (n=1), endocrine disorder (n=1), hearing loss (n=1) and respiratory conditions (n=1). Two parents reported no formal diagnosis for their child's disability. Health professionals that were accessed by respondents included general practitioners (n=26), paediatricians (n=22), occupational therapists (n= 17), speech pathologist (n=13), physiotherapist (n=11), social workers (n=7), psychologists (n=4), nutritionists or dieticians (n=4), podiatrists (n=2) and other health professionals (n=11). Seventy four percent of children were not meeting the daily recommendations of daily PA. Twenty seven participants (79%) indicated that there were barriers to their child participating in PA with these barriers including emotional, physical and environment/community barriers. From the qualitative data three main themes emerged limiting children with disabilities participation in PA: **segregation** where children with disabilities were set apart from those without a disability, **access to facilities and resources** where children with disabilities lacked access to trained professionals and facilities and **barriers specific** to the child where children with disabilities had difficulties participating in physical activity due to limitations of their disability.

### Conclusion

This study is the first of its kind in Australia to specifically investigate parents' and carers' perceptions of PA undertaken by rurally residing children with disabilities and the barriers preventing participation. Rurally residing children with a disability are not undertaking the recommended amounts of daily PA and face added barriers to participation.

## Presenter

**Jessica Langham** is a new graduate physiotherapist working in a small country town Macksville on the New South Wales coast. In her final year of university Jess undertook an honours project that was based in Tamworth, country NSW. Jess has a passion for rural health and a strong belief that health should be equal for all no matter where someone lives or their heritage. Jess would like to become a general therapist who is a jack of all trades and is able to best treat her patients no matter where she is working. Jess feels like she is truly blessed to be working in a rural town as she is working closely with other health professionals from doctors, dieticians through to exercise physiologists. Jess is thoroughly enjoying the rural lifestyle, helping those in her community and looking forward to further developing her skills to help those in her community.